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EMPLOYEE'S WITHHOLDING CERTIFICATE FOR CITY OF LANSING INCOME TAX

| RESIDENT | |
|----------------|--|
| ☐ NON-RESIDENT | |

☐ RENAISSANCE ZONE EXEMPT

| 1. Print Full Name | Social Security No | Social Security No. City, Township or Village where you | | ryčes ronderad in each city | | Employee Identification No. | | | |
|------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|-----------------------------|-----------------------------|--------------------------------------|--------------------------------------|--|--|--|
| 2. Address, Number and Street | City, Township or | | | | | Zip Code | | | |
| 3. Predominant Place of Employment Print name of each city where you work for this | City | Hospics of Sinn | Under 25% | 40% 609 | K 80 | 96 100% | | | |
| employer and circle closest % of total earnings in each. | City (Section 2) | ou for the year, | Under 25% | 40% 609 | % 80 | n% 100% | | | |
| YOUR WITHHOLDING Check blocks for yourself | Regular \$600 exemption | | 00 exemption at end of year | Additional emption if | | Enter number of exemptions checked — | | | |
| (See instructions on which apply 5. Exemptions for your wife (husb | Regular \$600 exemption | | 00 exemption at end of year | Additional emption if | | Enter number of exemptions checked — | | | |
| employer. Otherwise he must withhold children | 6. (a) Exemptions for your Number 6. (b) Execution other | | | | Number | of line 6 (a plus b)—> | | | |
| CITY OF LANSING income tax from your earnings without exemption. 7. Add the num | 7. Add the number of exemptions which you have claimed on lines 4, 5 and a above and write the total | | | | | | | | |
| your records. If the information sub- my knowledg | I certify that the information submitted on this certificate is true, correct and complete to the best of my knowledge and belief. | | | | | | | | |
| mitted by the employee is not believed to be true, correct and complete the Finance Director must be so advised. | Signature | | | odner, etepsister | yesy, stac, glapbi se ve skaar | Your brother, a leasthar, a | | | |

LINE 3 INSTRUCTIONS—If you work for this employer in more than two cities or communities, print names of the two Michigan cities or communities where you perform the greatest percent of your work. Circle the closest percent of total earnings for work done or services rendered in each city or community listed. The estimated percent of total earnings from this employer for work done or services performed within taxing cities (line 3 on other side) is for withholding purposes only. In determining final tax liability this estimate is subject to substantiation and audit.

DEPENDENTS—To qualify as your dependent (line 6 on other side), a person (a) must receive more than one-half of his or her support from you for the year, and (b) must have less than \$600 gross income during the year (except your child who is a student or who is under 19 years of age), and (c) must not be claimed as an exemption by such person's husband or wife, and (d) must be a citizen or resident of the United States or a resident of Canada, Mexico, the Republic of Panama or the Canal Zone (this does not apply to an alien child legally adopted by and living with a United States citizen abroad), and (e) must (1) have your home as his principal residence and be a member of your household for the entire year, or (2) be related to you as follows:

Your son or daughter (including legally adopted children), grandchild, stepson, stepdaughter, son-in-law, or daughter-in-law;

Your father, mother, grandparent, stepfather, stepmother, father-in-law, or mother-in-law;

Your brother, sister, stepbrother, stepsister, half brother, half sister, brother-in-law, or sister-in-law;

Your uncle, aunt, nephew, or niece (but only if related by blood).

CHANGES IN EXEMPTIONS—You should file a new certificate at any time if the number of your exemptions INCREASES.

You must file a new certificate within 10 days if the number of exemptions previously claimed by you DECREASES for any of the following reasons:

(a) Your wife (or husband) for whom you have been claiming exemption is divorced or legally separated, or claims her (or his) own exemption on a separate certificate.

(b) The support of a dependent for whom you claimed exemption is taken over by someone else, so that you no longer expect to furnish more than half the support for the year.

(c) You find that a dependent for whom you claimed exemption will receive \$600 or more of income of his own during the year (except your child who is a student who is under 19 years of age).

OTHER DECREASES in exemptions do not affect your withholding until the next year, but require the filing of a new certificate by December 1 of the year in which they occur.

CHANGE OF RESIDENCE-You must file a new certificate within 10 days after you change your residence from or to a taxing city.

CHANGES IN EMPLOYMENT—You must file a new certificate by December 1 of each year if your Line 3 estimate of the percent of work done or services rendered in cities levying an income tax will change for the ensuing year.